



PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. 10/809,376-Conf. #7638 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** March 26, 2004 FEE TRANSMITTAL Filing Date Olav LYSNE First Named Inventor For FY 2009 C. B. Patel **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 2616 Art Unit 1380-0191PUS2 TOTAL AMOUNT OF PAYMENT Attorney Docket No. 65.00 METHOD OF PAYMENT (check all that apply) Check Credit Card None Money Order Other (please identify): Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP 02-2448 X Deposit Account Deposit Account Number. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity** Small Entity Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 220 110 Utility 330 165 540 270 140 70 Design 220 110 100 50 165 170 85 Plant 220 110 330 Reissue 330 165 540 270 650 325 0 0 0 Provisional 220 110 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 52 26 220 110 Each independent claim over 3 (including Reissues) 390 195 Multiple dependent claims Fee Paid (\$) **Multiple Dependent Claims Total Claims** Extra Claims Fee Paid (\$) Fee (\$) - 20 HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Extra Claims $\label{eq:heat} \mbox{HP = highest number of independent claims paid for, if greater than 3.}$ 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Number of each additional 50 or fraction thereof Extra Sheets __ (round up to a whole number) x - 100 = Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) \$65.00 Other (e.g., late filing surcharge): 2251 Extension for response within first month

SUBMITTED BY Registration No. 43,368 Telephone (703) 205-8000 Signature (Attorney/Agent) # 28380 December 8, 2008 aul C. Lewis

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PTO/SB/22 (11-08)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009	Docket Number (Optional) 1380-0191PUS2	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		
Application Number 10/809,376-Conf. #7638	Filed N	March 26, 2004
For METHOD AND DEVICE FOR NETWORK RECONFIGURATION		
Art Unit 2616	Examiner	C. B. Patel
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
<u>Fee</u>	Small Entity Fee	
X One month (37 CFR 1.17(a)(1)) \$130	\$65	\$ <u>65.00</u>
Two months (37 CFR 1.17(a)(2)) \$490	\$245	\$
Three months (37 CFR 1.17(a)(3)) \$1110	\$555	\$
Four months (37 CFR 1.17(a)(4)) \$1730	\$865	\$
Five months (37 CFR 1.17(a)(5)) \$2350	\$1175	\$
Applicant claims small entity status. See 37 CFR 1.27.		
A check in the amount of the fee is enclosed.		
Payment by credit card. Form PTO-2038 is attached.		
X The Director has already been authorized to charge fees in this application to a Deposit Account.		
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 .		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the applicant/inventor.		
assignee of record of the entire interest. See 37 CFR 3.71.		
Statement under 37 CFR 3.73(b) is enclosed	I. (Form PTO/SB/96).
attorney or agent of record. Registration Number	43,368	
attorney or agent under 37 CFR 1.34.		
Registration number if acting under 37 CFR 1.34		
Jomes M. Slatten # 2838	6 Decem	ber 8, 2008
Signature	Date	
Paul C. Lewis Typed or printed name	(703) 205-8000 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
Total of1 forms are submitted.		

12/09/2008 JADDU1 00000150 022448 10809376 01 FC:2251 65.00 DA